

ISSUE SELF-STAPLE AREA (for additional cross references)

INITIALS	ID NO.	DATE
FEE DETERMINATION		
O.I.P.E. CLASSIFIER	8	01/29/01
FORMALITY REVIEW		
RESPONSE FORMALITY REVIEW	JFH 109C	2/15/01
	SLS 87	7-06-01

# INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)..... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

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If more than 150 claims or 10 actions  
 staple additional sheet here

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